## NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Docket Number 854063.747

hereby certify that this correspondence is being faceimite transmitted to the USPTO or deposited with the United States Postal Service with officient postage as first class mail in an envelope addressed to for Patients over for Patients, P.O. Box 1450, Alexandria, VA 22313-1450* 37 CFR 1.8(a) a	In re Application of Ernesto Lasalandra et al.			
	Application Number		Filed	
signature	10/788,962		February 27, 2004	
yped or printed	For			
ame	MULTIPLE-THRESHOLD MULTIDIRECTIONAL INERTIAL DE			
	Art Unit Examiner			
	2836	Adi Amrany		
Applicant hereby <b>appeals</b> to the Board of Patent examiner.	Appeals and Int	erferences from the	last decision of the	
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 540				
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fee Deposit Account No. <u>19-1090</u> .	es which may be r	equired, or credit any	overpayment to	
X A petition for an extension of time under 37 CFR 1.	136(a) (PTO/SB/2	2) is enclosed.		
WARNING: Information on this form may become put form. Provide credit card information and authorization	olic. Credit card in on on PTO-2038.	formation should not	be included on this	
I am the				
applicant/inventor.		/Hare	old H. Bennett II/	
assignee of record of the entire interest. See 37 Statement under 37 CFR 3.73(b) is enclosed. (F			Signature	
attorney or agent of record. Registration No. 52,404		Hard	Harold H. Bennett II	
attorney or agent acting under 37 CFR 1.34.		Туре	d or Printed Name	
Registration number if acting under 37 CFR 1.34	_			
			206) 622-4900	
		Tel	lephone Number	
		A	April 16, 2009	
			Date	
IOTE: Signatures of all the inventors or assignees of record of the nore than one signature is required, see below*.	entire interest or the	r representative(s) are re	equired. Submit multiple forms if	
*Total of 1 form is submitted				

SEND TO: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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